LICENSE NO.	
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CONTRACTOR LICENSE APPLICATION

LICENSE FEE \$ 100.00 PER CALENDAR YEAR (JANUARY TO DECEMBER)

I hereby make applications for a License to do work in the Borough of Dunmore as (check one of the following): General Contractor Mechanical Contractor Other Applicant _____ ĺ. Address _____ 2. Phone Number _____ 3. Type of firm (check one): Sole Proprietorship ___ Partnership ___ Assn. ___ Incorporated ____ Other (specify) ____ 4 5. Principal Officers Name and Address Phone _____ Holding valid licenses Scranton yes no Years Experience 6. 7. Name, address, and telephone number of insurer Account of Public Liability Insurance & Certificate of Workmens Compensation 8. Insurance (CERTIFICATES OF INSURANCE REQUIRED) The undersigned applicant verifies that all statements on this application are true and correct. The applicant further states that he understands any false statements made herein are subject to the penalties of 18 PA. Section 4904, relating to unsworn falsification to Authorities. APPLICANT'S SIGNATURE APPROVED _____DATE_____ FEE PAID AMOUNT ZONING OFFICER____

Return completed application, fee, and insurance certificate to

Persueh of Dummore 400 S Blakely St Dummore, PA 18512 or fax to (570) 343-8107